

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 753112

1. Entity Name

WEYBRIDGE WOODS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

2414 BUTTERNUT CT
DUNEDIN FL 34698
US

Mailing Address

2414 BUTTERNUT CT
DUNEDIN FL 34698
US

2. Principal Place of Business

2325 BEN HOGAN DR
Suite, Apt. #, etc.

3. Mailing Address

2325 BEN HOGAN DR
Suite, Apt. #, etc.

City & State

DUNEDIN, FL

City & State

DUNEDIN, FL

Zip

34698

Country

US

Zip

34698

Country

US

4. FEI Number

59-2001262

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POPHAM, NEAL R
2414 BUTTERNUT CT
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name: EDWARD HAWKES
Street Address (P.O. Box Number is Not Acceptable): 2325 BEN HOGAN DR
City: DUNEDIN FL Zip Code: 34698

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: EDWARD HAWKES
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FEB 5, 2002

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BOUCHARD, KAREN	
STREET ADDRESS	1350 SAGO COURT	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRADY, JAY	
STREET ADDRESS	2325 ASHFORD CT	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	DT	<input type="checkbox"/> Delete
NAME	PATE, GEORGE	
STREET ADDRESS	1453 STURBRIDGE	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	POPHAM NEAL	
STREET ADDRESS	2414 BUTTERNUT CT	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	DS	<input type="checkbox"/> Delete
NAME	WELCH, AGNEW	
STREET ADDRESS	1240 WEYBRIDGE LAEN	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	DP	<input type="checkbox"/> Delete
NAME	EDWARD HAWKES	
STREET ADDRESS	2325 BEN HOGAN DR	
CITY-ST-ZIP	DUNEDIN, FL 34698	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EDWARD HAWKES	
STREET ADDRESS	2325 BEN HOGAN DR	
CITY-ST-ZIP	DUNEDIN, FL 34698	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GEORGE W PATE REGISTERED AGENT

FEB 5, 2002 (727) 736-6629



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)